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DRUGS IN MASSACHUSETTS: THE DOMESTIC IMPACT OF A FOREIGN INVASION

A REPORT

TO THE

COMMITTEE ON FOREIGN RELATIONS
UNITED STATES SENATE

BY

SENATOR JOHN KERRY

JANUARY 1990

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LETTER OF TRANSMITTAL

U.S. SENATE,
COMMITTEE ON FOREIGN RELATIONS,
Washington, DC, January 5, 1990.

Hon. CLAIRBORNE PELL,
Chairman, Committee on Foreign Relations,
U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: At your direction, in 1987, the Subcommittee on Terrorism, Narcotics and International Operations of the Foreign Relations Committee began to investigate the relationship between foreign narcotics trafficking, law enforcement, and foreign policy. This year, in addition to continuing these investigations, the subcommittee undertook to look more closely at the domestic impact of foreign drugs by focusing on one State, Massachusetts.

This report, "Drugs in Massachusetts—The Domestic Impact of a Foreign Invasion," is a report by the chairman of the subcommittee to the full committee. It is based on field hearings the subcommittee conducted in Massachusetts during the week of August 29, 1989, including the hearing you chaired in New Bedford, and hearings in Lawrence, Quincy, Springfield, and Worcester, which I chaired.

The subcommittee received testimony from the attorneys general of Massachusetts and Rhode Island, the U.S. Attorney for Massachusetts, mayors of cities across Massachusetts and the mayor of Providence, representatives of the U.S. Drug Enforcement Administration and the U.S. Coast Guard, police chiefs, district attorneys, sheriffs, and other law enforcement personnel. The subcommittee also took testimony from specialists in treating drug addiction, public housing, educators, victims of drug-related crime, and recovering drug addicts. In all, the subcommittee heard 53 witnesses provide live testimony, and received information from several hundred additional individuals and institutions from throughout the State.

These hearings demonstrated that foreign drug trafficking is simultaneously a foreign policy and domestic crisis, which must be responded to with a continuing and comprehensive program of reforms by the Federal Government. Specific recommendations arising out of the hearings are included in section II of this report.

I very much appreciate the support and assistance you have given us throughout the course of this investigation. I would like to note my personal appreciation for the efforts of the staff involved in preparing the hearings, Bonnie Cronin, Chris Greeley, John DiSimas, Bill Bradley, Vanessa Householder, and the chief of staff of

my Massachusetts offices, Patty Foley; and my counsel, Jonathan Winer, who helped prepare the enclosed report.

I believe these hearings have further documented the damage that drugs from abroad are inflicting upon our most basic local institutions: the family, the community, the schools, law enforcement, and health care. I hope that this report will contribute to better understanding by the Congress of the magnitude of the problem, and to constructive legislative proposals which may allow us better to attack this terrible scourge.

Sincerely yours,

JOHN KERRY,

Chairman, Subcommittee on Terrorism, Narcotics and International Operations.

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I. FINDINGS

1. *Illegal drugs have infiltrated every area of Massachusetts, and are having a continuing and devastating impact on the quality of life in Massachusetts.*—This infiltration constitutes a foreign invasion which is attacking the fundamental fabric of basic institutions throughout the State.

2. *Foreign drug traffickers have extensive distribution networks throughout Massachusetts reaching to every community.—These distribution networks include foreign nationals from around the globe, including among others organized crime groups of Colombians, Dominicans, Jamaicans, Israelis, Lebanese, Chinese, and Southeast Asians.*

3. *The increased presence of foreign narcotics in Massachusetts is a principal cause of criminal activity in the State.*—More than 70 percent of all crime in the State is drug related.

4. *State and local law enforcement officials do not have the resources to cope with the rising level of crime caused by drugs from abroad.*—Massachusetts does not have enough prison space to house all those who could be convicted of serious narcotics offenses. Jails and prisons across the State are suffering from severe overcrowding as a result of increases in drug-related convictions. Because fewer drug offenders are serving time, deterrence is reduced.

5. *State social service agencies in Massachusetts do not have the resources to treat most of the drug addicts who wish to receive help.*—Cities and towns are failing to implement drug education programs for young people in Massachusetts because they do not have enough money to pay for them.

6. *The Federal Government has failed to provide for the common security of the people of Massachusetts by adequately restricting drugs from getting into the State from beyond U.S. borders.*

7. While there have been significant instances of cooperation between Federal law enforcement and State and local law enforcement, *too often State and local law enforcement officials do not get the information they need on a timely and comprehensive basis from the Federal Government properly to investigate and prosecute major drug cases.*

8. *Current assistance from the Federal Government to Massachusetts is insufficient* to help State law enforcement, drug treatment personnel, and the Massachusetts public educational system fight drugs effectively.

9. *Massachusetts capability to respond to the drug crisis appropriately has been crippled by the combination of cuts in local and Federal funding for law enforcement over the past decade.*—The cuts in funding for law enforcement have principally been the consequence of Proposition 2½ and the drastic reduction in direct Federal assistance to local law enforcement under the Reagan administration.

10. *Layoffs in police departments, waiting periods in drug treatment programs, and limits on drug education programs caused by local, State, and Federal funding cuts have created direct and indirect costs to Massachusetts significantly greater than the funds that would be needed to provide them with adequate resources.*—The annual cost to Massachusetts in additional drug-related crime caused by drugs substantially outweighs the costs of spending public funds to fight drugs.

II. Recommendations

1. *Provide immediate modular housing on Federal property to house nonviolent convicted drug offenders and provide Federal funding for State and local correctional facilities.*—The single greatest problem faced today by Massachusetts in fighting drugs is the lack of space to house drug offenders. Emergency help from the Federal Government is essential.

The subcommittee chairman recommends that the Federal Government immediately turn over military bases which have been decommissioned under Federal base closing procedures and make the facilities available for housing drug offenders. In addition, the subcommittee chairman recommends that the Federal Government review all other Federal property in New England to determine what facilities could properly be used to provide housing for drug offenders.

The subcommittee chairman considers Pease Air Force Base in New Hampshire, which was selected for decommission under the Federal base closing plan, as one suitable site for the housing of low-risk inmates in the New England region to free up prison space for more serious offenders.

In addition, the subcommittee chairman recommends the Federal Government use funds authorized and appropriated for Federal prisons and make those funds available for State and local facilities to meet the most serious cases of overcrowding.

2. *Provide treatment on demand.*—A drug addict who cannot receive treatment because there is no room for him or her is likely to cause injury to self, family, and community until he or she gets treatment. There was unanimous opinion among those testifying before the subcommittee that treatment on demand is essential to help Massachusetts fight narcotics.

While results vary significantly among programs, averaging long-term success rates of between 25 and 50 percent, some programs have reached success rates as high as 90 percent as a result of being able to devote resources beyond the typical 21-day limitation of most drug treatment programs. Several witnesses suggested that the State needs not merely to provide treatment on demand, but comprehensive treatment with a followup extending beyond the short-term detoxification period.

The subcommittee chairman recommends that the Federal Government make it a national policy to provide treatment to drug users on demand, funded at an appropriate level through specific increases in appropriations for drug treatment.

3. *Provide Federal support for comprehensive K-12 drug education programs.*—Drug education remains at the core of preventing

people from trying drugs and thereby risking becoming drug addicts. Many witnesses described the task as most essential for young people because of the pressure many otherwise may feel from peers and pushers.

The subcommittee chairman recommends that the Federal Government increase funding for drug education to make it possible for the States to adopt universal kindergarten through grade 12 drug education programs.

4. *Renew Federal justice assistance funding, at the levels previously provided by LEAA, adjusted for inflation.*—Police in Massachusetts are working harder and making more arrests to combat the increased level of narcotics in the State. Yet a number of local police departments are actually having to lay off police at a time when they need to hire more of them, due to funding cuts. In the 1970's, the Law Enforcement Assistance Administration (LEAA) brought many Massachusetts law enforcement agencies into the 20th century. In the 1990's, many witnesses testified that it is even more critical for revitalized Federal justice assistance to bring State law enforcement agencies first up to date with the technologies of today, and then on toward the technologies of the coming century. LEAA funding could also help communities devote more of their resources to personnel and reverse current layoffs.

The subcommittee chairman recommends that the Federal Government increase funding for State and local justice assistance to the level of $2 billion a year, up from the current authorized level of $600 million and the current appropriated level of $450 million.

5. *Improve current criminal intelligence networks.*—Federal funding has already created a regional New England State Police Information Network (NESPIN) which is supposed to serve much of that function in providing information, equipment, and drug "buy" money, and Federal funds have also been used to create a computer system for the State Police Criminal Information Section. Yet a number of witnesses complained that they do not have access to criminal intelligence systems similar to the Federal NADDIS system run by the DEA, and State criminal justice officials have said that "additional funding" is needed to create a "modern, well-equipped information section."

The subcommittee chairman recommends that the Commonwealth of Massachusetts seek Federal grant money from current criminal justice assistance funds to supplement and improve the NESPIN system, the State Police Criminal Information Section system, and develop a comprehensive local, statewide, and regional criminal intelligence network.

6. *Overhaul the Massachusetts drug forfeiture laws and adopt a Massachusetts State RICO law.*—In recent years, local district attorneys have been unable to seize the illegal profits of drug traffickers under State law, and have had to turn cases over to Federal prosecutors, or permit drug traffickers to retain the wealth they have made, as a result of the State's failure to pass a RICO law similar to the Federal RICO statute. State law enforcement officials also have found it difficult to use the forfeiture laws that are on the books to take the resources from the traffickers and use it for law enforcement.

The subcommittee chairman recommends that the Commonwealth of Massachusetts pass a State RICO law as the most efficient means of seizing the assets of drug criminals and to use those assets to increase the resources of law enforcement. The State should also revise its drug forfeiture law along the lines of Federal law so that cases need no longer be referred to the U.S. attorney's office for processing. (On January 13, 1990, Massachusetts enacted new drug forfeiture legislation along the lines recommended here, which should substantially solve this problem.)

7. *Adopt public housing policies providing for swift eviction of drug dealers from public housing units and improved security for public housing areas.*—Witnesses testified that today it is very difficult to evict suspected drug dealers from public housing.

The subcommittee chairman recommends that the complex bureaucratic procedures currently in place should be simplified to provide a simple civil hearing on the issue of whether or not a public housing resident has been engaged in narcotics trafficking and should therefore be evicted.—Senator Kerry has drafted legislation that would accomplish this at the Federal level, which will be added as an amendment to the Affordable Housing Act next year.

8. *Toughen State bail standards,* to allow judges in Massachusetts to use discretion on whether to impose bail where the safety of the community is in jeopardy, a standard adopted by the Federal Government in 1984. Many witnesses described how drug dealers pay cash to get out of jail on bail and then flee the jurisdiction of the Massachusetts criminal justice system, making a mockery of it.

The subcommittee chairman recommends that the Commonwealth of Massachusetts toughen and strengthen its current bail standards by adopting the Federal standard which allows a judge to consider "the safety of the community" in setting bail.

9. *Improve coordination between Federal, State, and local law enforcement agencies,* especially in sharing information and resources.—A number of local law enforcement officials complained that they do not receive timely information or cooperation from Federal law enforcement in cases in which Federal agents have declined jurisdiction.

The subcommittee chairman recommends that the FBI, DEA, Customs, and Coast Guard develop a plan to improve their communications and cooperation with local and State law enforcement.—The chairman also recommends that the DEA devote additional resources to training local law enforcement agentsfor undercover work and other antidrug efforts.

10. *Eliminate the sale of semiautomatic assault weapons except to law enforcement personnel.*—The Massachusetts Attorney General and others testified that a ban on assault weapons would do much to protect police officers from the risk that extremely dangerous narcotics traffickers will be armed with greater firepower than the police officer may have. The impact of assault weapons in the hands of drug traffickers in countries like Colombia provide the most vivid examples of the hazards of permitting their continued distribution.

Recently, the city of Boston banned the sale of certain assault weapons within the city limits. the State legislature is also considering such legislation, as is the Congress.

The subcommittee chairman recommends that the sale of assault weapons be banned nationwide, except to law enforcement personnel, and that exports of those weapons also be made illegal, to make it more difficult for drug traffickers and other criminals to obtain weapons that pose an extremely serious threat to law enforcement officers.

III. Background

In 1987, the Subcommittee on Terrorism, Narcotics and International Operations of the Foreign Relations Committee began to investigate the relationship between foreign narcotics trafficking, law enforcement, and foreign policy. During the course of that investigation, chaired by Senator John Kerry, the subcommittee documented how foreign drugs and drug money had corrupted officials in Panama, the Bahamas, Honduras, Haiti, Colombia, and other Latin American nations; how United States foreign policy had in several instances interfered with the war on drugs; how drugs enter this country from abroad; and how drug money is transported from the United States and laundered overseas.

As the investigation continued, Senator Kerry uncovered specific instances in which narcotics traffickers working with our or other governments had actually been responsible for smuggling substantial amounts of illegal drugs into Massachusetts.

For example, the subcommittee found that two separate groups of narcotics traffickers based in south Florida were both extensively involved in smuggling drugs into Massachusetts and also in providing assistance to the Nicaraguan Contras in connection with the Reagan administration's secret and illegal Contra program. The subcommittee also found a case in which Bahamian officials were working with Massachusetts drug traffickers and money launderers to launder the proceeds from drug smuggling to Massachusetts. These cases highlighted how events in Latin America were having a direct impact on Massachusetts. The cases also demonstrated how our Government, and some foreign governments, had developed links to people who were bringing drugs into Massachusetts, and in some cases even provided the drug traffickers with public funds.

The subcommittee also found cases in which persons and entities with Massachusetts ties used foreign financial institutions to launder drug money from Massachusetts in a wide array of foreign countries, including Colombia, Panama, the Bahamas, Liechtenstein, Hong Kong, and Switzerland.

Accordingly, the subcommittee chairman decided to conduct a comprehensive examination of the impact that foreign narcotics have actually had on the people of Massachusetts locally.

During the week of August 29, 1989, the Subcommittee on Terrorism, Narcotics and International Operations conducted a series of field hearings in Massachusetts. In hearings chaired by Foreign Relations Committee Chairman Claiborne Pell (New Bedford, August 29) and by subcommittee Chairman John Kerry (New Bedford, August 29; Lawrence, August 30; Quincy, August 31; Springfield, September 1; and Worcester, September 1), the subcommittee received testimony from the Attorneys General of Massachusetts

and Rhode Island, the U.S. Attorney for Massachusetts, mayors of cities across Massachusetts and the Mayor of Providence, representatives of the U.S. Drug Enforcement Administration and the U.S. Coast Guard, police chiefs, district attorneys, sheriffs, and other law enforcement personnel.

The subcommittee also took testimony from specialists in treating drug addiction, public housing, educators, victims of drug-related crime, and recovering drug addicts.

Finally, the subcommittee received written submissions from additional officials, drug treatment specialists, and educators, as well as from a significant number of Massachusetts citizens who provided personal views of the impact of narcotics on Massachusetts.

In all, the subcommittee heard 53 witnesses provide live testimony, and received information from several hundred additional individuals and institutions from throughout the State.

This report summarizes the information gathered in connection with those hearings.

IV. The Scope of the Problem

Where do the drugs come from?

State and local governments are best able to solve problems that arise locally, and least able to respond to problems that grow out of regional, national, or international conditions. The drug problem, which is international in scope, exemplifies this rule. State-by-State and city-by-city criminal justice statistics compiled by the FBI demonstrate that the drug problem in Massachusetts is neither more severe nor more pervasive than elsewhere in the United States: while illegal narcotics are sold in essentially every community in the State, smuggling networks in Massachusetts are less extensive than in many areas of the country, according to statistics assembled by the Drug Enforcement Administration.

Although institutions within the State can concentrate on reducing the demand for drugs through education, treatment, and law enforcement, the problem of supply lies largely beyond Massachusetts borders. Almost all of the illegal drugs sold in the State are imported. For this reason, official after official described the presence of drugs in Massachusetts in words ordinarily applied to a foreign military force. They called it "an invasion."

As Mayor John K. Bullard of New Bedford testified:

> "We are not being invaded by Russians. We are not being invaded by savings and loans. We are daily, in New Bedford, being invaded by foreign people . . . carrying foreign drugs."

Or to quote Anthony Salvo, Mayor of Salem:

> "We talk a lot about these global problems that we have, Afghanistan, communism, South Africa, and so forth, but the greatest problem in this country and probably in the world is drugs . . . it is public enemy No. 1."

According to Hampshire and Franklin County District Attorney, Judd Carhart, drugs are:

> "A clear and present danger to our society . . . the most dangerous situation that faces our country is not from the Communist bloc but from the specter of drug involvement of our youth."

In the words of Lenny, a convicted narcotics trafficker and former $1,000-a-day cocaine user, now on parole:

"The most deadly thing in this country right now is drugs. Never mind AIDS or anything else. It is drugs."

Among illegal drugs, cocaine represents "the most widely-trafficked narcotic substance," in Massachusetts, according to the Justice Department, and in the words of State Attorney General James Shannon, "the drug of choice." Today, over 80 percent of the drug arrests in the State are for cocaine-related offenses.

Most of the cocaine sold in Massachusetts comes to the State from Colombia. According to a recent report on the Massachusetts drug problem by the Massachusetts U.S. Attorney to the Justice Department:

> "The cocaine generally is imported from Colombia into south Florida or New York and is then transported by land or air to the greater Boston area, to Worcester, to Springfield, or in some cases, up Interstates 91, 93, and 95 to Vermont, New Hampshire, and Maine, respectively. In addition, major Colombian communities have settled in Central Falls, RI, and Lowell, MA, and these areas have served as bases for cocaine distribution organizations."

The second largest organized group of cocaine traffickers in the State are Dominicans who obtain their cocaine from Colombians in New York and transport it by automobile to greater Boston or greater Lawrence. Jamaicans, Israelis, and Sicilians are also involved with cocaine trafficking in the State.

Most of the cocaine that comes into Massachusetts is transported by truck or automobile. For example, DEA statistics show that Massachusetts was responsible for less than one-third of 1 percent of all smuggling activity by aircraft in the United States in 1988. By contrast, Florida was responsible for 28 percent; California for 12 percent; and Texas for 18 percent.

Massachusetts heroin principally comes to the State by automobile from organizations based out of State, in New York and the Carolinas. Additional sources of heroin include Chinese and Southeast Asian trafficking organizations, some of which are based in Chinatown in Boston; and shipments of Lebanese heroin into Logan Airport in kilogram or pound quantities.

Massachusetts extensive coastline is used by thousands of fishing vessels and as many as 1 million pleasure boats over the course of a year, providing an inviting environment for drug traffickers to operate in. Colombian and Cuban-American traffickers from south Florida, among others, transported large shipments of marijuana into Massachusetts from Colombia and the Caribbean in the mid-1970's and early 1980's in a three-stage process using large "mother ships" to transport the drugs, transhipping them to smaller boats, and then offloading them to trucks for local distribution.

Typical of this method of smuggling was the *Barbara Lee* case, in which a mother ship was found off New Bedford in 1983 carrying 6 tons of marijuana shipped by Cuban-Americans based in south Florida who were working with Colombian traffickers in conjunction with a local Massachusetts motorcycle gang.

No "mother ships" have been seized by the Coast Guard in Massachusetts in more than 3 years, and today cocaine is more typical-

ly smuggled into the State via small aircraft, truck, and automobile. Nevertheless, marijuana continues to be smuggled by boat, as was demonstrated by the bales of marijuana that washed up on the shores of Beverly, MA during the summer of 1989.

However, commercial shipping vessels are clearly still being used for smuggling cocaine, and heroin as well. In 1988, the single largest seizure of heroin by the Drug Enforcement Administration was 83 kilos of heroin smuggled in a bean-sprout washing machine aboard the vessel the *Hyndai Challenger,* seized August 30, 1988, in Boston. The magnitude of this seizure is highlighted by the fact that this one boat carried 75 percent of all the heroin seized by the DEA in 1988 from commercial vessels in the entire United States. In a second seizure, another commercial vessel which was berthed in Boston was found to have smuggled about 17 kilos of cocaine.

WHERE DO THE DRUGS GO TO?

Witness after witness who appeared before the subcommittee testified that illegal drugs are everywhere in Massachusetts—in every community, and in practically every neighborhood.

To get there, the drugs come first into distribution centers scattered throughout the State.

Cocaine Distribution Centers.—The subcommittee found little evidence that Massachusetts has turned any corners in reducing the presence of cocaine coming to Massachusetts from beyond the borders of the State. Witness after witness testified that when it comes to cocaine in Massachusetts, as in the rest of the United States, "price is down, and availability is up."

The subcommittee obtained statistics from the FBI on the overall number of arrests in Massachusetts three largest cities to determine whether the apparent increase in drug trafficking in the State was borne out by the number of arrests. The statistics demonstrated significant increases in drug offenses in Boston, Worcester, and Springfield, with the two smaller cities reporting even larger increases in drug trafficking than Boston.

In Boston, arrests rose from 2,641 in 1983 to 4,073 in 1987, and to 7,500 in 1988. Almost the entire increase in arrests was for the sale or manufacture of heroin or cocaine. According to Boston Police Commissioner Francis M. Roache, arrests for cocaine increased over 800 percent since 1985. In Worcester, drug-related arrests doubled from 1,255 to 2,265 from 1983 to 1987. In Springfield, drug-related arrests more than tripled, from 185 in 1983 to 719 in 1987, of which two-thirds were heroin or cocaine related.

As these statistics suggest, Boston, Worcester, and Springfield are each significant centers for the distribution of Colombian cocaine, as is Lowell. According to Justice Department reports, Lawrence has been used as a distribution center by Dominican cocaine suppliers, as have Roxbury, Dorcester, and Mattapan. Roxbury and Dorcester have also been used as distribution centers by Jamaican cocaine traffickers.

The supply of cocaine in Massachusetts continued to increase through mid-1989, with wholesale cocaine prices in Boston falling from $45,000 per kilogram to $18,000 per kilogram since 1985, according to U.S. Attorney Wayne Budd. An ounce of cocaine in

Boston in 1989 purchased wholesale cost as little as $700, only one-third of what it cost 2 years ago, according to Attorney General Shannon.

The largest seizure of cocaine in the history of New England took place on December 12, 1988, with the seizure of 500 kilograms of cocaine in Methuen, worth approximately $10 million in street value.

The more significant cases prosecuted by the Federal Government in Massachusetts in recent years of cocaine traffickers show that cocaine trafficking knows neither ethnic, geographic, nor class boundaries:

—Lowell. The Restrepo family from Colombia transported cocaine from Florida to Lowell in specially designed compartments within the gas tanks of cars, as well as in hollowed-out bumpers, from 1984–86.

—Framingham. The Triple X Group, centered in Framingham and Ashland supplied hundreds of customers in Massachusetts with cocaine obtained from the Restrepo family. The customers typically were middle-class people working regular jobs who purchased small quantities of cocaine regularly for personal use.

—Lawrence. Lawrence is a center for Colombian cocaine obtained principally through Queens, New York City and for cocaine trafficking by a group of Dominican smugglers.

—Roxbury/Dorchester. The inner city has been a center for Jamaicans who have primarily obtained their cocaine from Cuban drug dealers in Miami. Jamaican "Posse" groups, which control marijuana, cocaine, and crack cocaine distribution in a number of poorer neighborhoods across the country have settled in the area, including the "Dog Posse," the "Jungle Posse," the "Montego Bay Posse," the "Reema Posse," the "Riverton City Posse," the "Shower Posse," the "Spangler Posse," the "Spanishtown Posse," the "Tel Aviv Posse," the "Tivoli Gardens Posse," and the "Waterhouse Posse." The posses have been associated with a high level of violence wherever they have operated arising from turf wars to protect product and territory. Dominican traffickers have begun to develop a substantial presence in these areas of Boston in the past year.

—Brookline. This affluent community has become a center for Israeli cocaine smuggling, smuggled from Colombia to Florida for distribution in the Boston area and in Portland, ME.

—New Bedford. As the largest commercial fishing port on the east coast, New Bedford has remained a center for smuggling by watercraft. Cocaine is widely available in the New Bedford area, supplanting the marijuana that was the principal drug smuggled early in this decade.

—Springfield. Traditional organized crime groups are active in the distribution of cocaine in the western part of the State.

—Cape Cod. Cocaine is readily available in nearly all of the small towns along the Cape, sold in smaller quantities, and typically controlled by small-time dealers who obtain the cocaine in Florida or New York and transport it to the cape by automobile.

—The Berkshires. Teenagers from Yonkers and the Bronx in New York are coming to the Berkshires, staying in local motels,

and selling cocaine throughout Berkshire County as part of a New York gang operation.

Heroin Distribution Centers.—The Justice Department has cited Boston, Worcester, Springfield, Lowell, Lawrence, Lynn, Fall River, and New Bedford as the most significant centers for the distribution of heroin in Massachusetts. Drug Enforcement Administration estimates suggest that the Boston area alone today has approximately 11,000 heroin addicts.

As described above, the single largest heroin seizure from a commercial vessel in the United States took place in Boston last year, indicating the continuing scope of the heroin trade in New England.

IMPACT ON COMMUNITIES

Those testifying to the subcommittee expressed again and again that the damage that drugs are currently causing to communities in Massachusetts represents as serious a crisis as faced by our people in any war since the founding of our nation. This concern was expressed by officials and citizens alike, from around the State.

In the words of U.S. Attorney Wayne Budd:

> "It is very difficult to capture entirely or overstate the devastating effects of illegal drug use on the people of Massachusetts. The toll must be measured in terms of drug-induced violence, drug-induced property crime, lost jobs and wages, broken families, shattered lives and overall diminished quality of life. The dollar cost of illicit drug use is well into the millions of dollars per year, if not billions."

As Mayor John K. Bullard of New Bedford testified:

> "Lives are ruined through addiction. Antisocietal subcultures flourish. Housing and neighborhoods are destroyed. Police courts and prisons are clogged, and every day young people are continually recruited into a destructive lifestyle."

As Martin Dunn, Mayor of Holyoke, testified:

> "I represent a city that has really been devastated by drug activity and substance abuse in general. The crime in the city of Holyoke, a city of some 40,000 people, is continuous and very, very violent. It really all culminated several weeks ago in a double murder over a sour drug transaction where we had a 22-year-old male stick a rifle in the side of a truck and pull the trigger 15 times, killing the two occupants in the truck."

The Weymouth Board of Selectman felt its drug problem was so significant that they voted unanimously to send a formal written statement to the subcommittee. The selectmen wrote they were:

> "compelled to tell you about the magnitude of the drug problem in the town of Weymouth as well as the entire Commonwealth and society in general. According to the Weymouth Police Department, nearly every burglary is drug related as well as a majority of other crimes being perpetrated by individuals with drug problems."

In Waltham, according to Police Chief Stephen H. Unsworth, the effect of drug activity has been "devastating." Chief Unsworth testified:

"Drugs permeate the lives of so many of our citizens that they often touch us in unpredictable ways. I am of the opinion that an extremely large percentage of the larcenies, housebreaks, and motor vehicle breaks which occur in our city are drug related. The vast amount of money needed to support a drug habit makes such a conclusion highly probable. Many of our citizens who have been the victims of theft, have unknowingly been the victims of drugs. The cost to our communities in theft alone is staggering."

In the city of Framingham, according to Police Chief Brent B. Larrabee:

"Drug use and abuse permeates every neighborhood in our community, regardless of economic or ethnic composition. We have also found that the majority of crimes in our community are committed by drug users or addicts . . . We have also noticed an alarming increase in child and spouse abuse, both physical and psychological, which is directly attributable to drug use. Drugs tear at the fabric of the family unit, and often create a cycle in which children follow parents into a life of crime and drugs."

In the town of Lexington, "the majority of serious crimes stem from drug or alcohol abuse," according to Chief of Police Paul E. Furdon.

In the town of Shirley, Paul G. Thibodeau, chief of police, fears that "we have lost a whole generation to the perils of drug abuse."

In the town of Wellesley, John K. Fritts, chief of police, reported that "the war on drugs is being lost," a sentiment shared by Chief of Police Richard A. Benoit of the city of New Bedford.

In the small Massachusetts border town of Bernardston, next to Vermont, the chief of police, Peter Brulotte, reported that there is "a considerable amount of drug activity," including distributors as well as users.

In Martha's Vineyard, Christopher S. Look, Jr., Sheriff of Dukes County, reports that "since 1985, and in a population of approximately 15,000, this area's law enforcement has identified and targeted some 200 ongoing drug enterprises."

According to Sheriff Look, these drug enterprises were responsible for a substantial number of the property crimes in Martha's Vineyard, as well as nearly 50 drug-related deaths and suicides among young people on the island over the past decade, a statistic which Sheriff Look described as "horrifying."

In Boston, of all those crimes that are not directly related to narcotics, 70 percent are indirect consequences of drugs, according to District Attorney Newman Flanagan, including drug-related theft and burglaries, drug-related violence, and drug-related murders in drug-turf wars.

According to Bristol District Attorney Ronald Pina, 72 percent of the violent crime in Massachusetts overall is drug related, and if one adds alcohol, 94 percent of all violent crime is related to some kind of substance abuse. District Attorney Pina testified that another study pointed out that 62 percent of all the child abuse cases are drug and alcohol related.

In the Berkshires, Stockbridge Police Chief Richard B. Wilcox describes his town as one of the kind "immortalized in the paintings

of Norman Rockwell . . . represent[ing] the quintessential small town in America." Yet according to Chief Wilcox, "I have never seen a drug problem of the likes we are experiencing now and have been over the last several years."

"The people in Lawrence and Lynn do not see the international drug traffic. They do not see Fabio Ochoa in downtown Lawrence, but they cannot live in Lawrence and Lynn in some of these streets. They cannot go outside their houses . . . they are fearful for their lives," Jim Jajuga, Essex County Drug Task Force chief testified.

In Springfield, there has been "an overwhelming increase in the number of drug related cases in the last year and a half," according to the district attorney's office. Worse, the increase in drug use has included a disproportionate number of young people. According to the Springfield DA's Office:

> "Oftentimes these juvenile defendants come from single parent households where the sole source of support is welfare. The family income many times is supplemented by the proceeds of drug sales, in essence these juveniles become the breadwinners of the family. Another frightening aspect of this trend is the age of the juveniles involved. Many of these defendants are no more than 10 or 12 years of age. These juveniles are very well organized and have a network of younger children who run the drugs from one location to another . . . In Springfield District Court alone the statistics show that the number of defendants charged with drug offenses has exactly doubled in the past year."

The district attorney's office described the drug abuse situation in Springfield as "horrendous," and the city as "in crisis" as a result of the drug use.

Foreign drugs have also created significant health problems in the State. Drug-related AIDS cases are increasing substantially as a result of intravenous drug use, especially in the Hispanic population in Massachusetts. More pregnant women are giving birth while addicted to drugs, producing often premature babies who are born addicted, or with significant drug-induced neurological damage.

The impact of narcotics on public housing has also been substantial, as was detailed in testimony by Elsie Torrez, who described how her children would find hypodermic needles around the Hancock Housing Project in Lawrence where she lives, and how drugs permeated the project and made life for the people living there miserable.

Massachusetts citizens wrote the subcommittee to report individual horror stories connected with drugs, describing case after case of personal tragedy resulting from the ready availability of narcotics in their communities.

As Bob Flagg of Westfield, Mass. wrote:

> "I am 1 of 15 children out of the Boston area and have 5 children of my own. I have been a teacher, coach, and sports official for over 40 years. Drugs have drastically affected all of the above-mentioned family and social groups with which I have been associated. Two of my sons went the whole route—alcohol, grass, cocaine, et cetera, and believe me it was hell.

> One of my married sisters was killed by a drug addict driving his pickup truck up onto a sidewalk in Portland, ME. She left five young children behind. Kids I have taught and coached over the years have been contaminated by drugs—some as early as the age of 12."

As a woman from Attleboro, Mass., who asked that her name be kept anonymous, wrote:

> "There is a bar across the street from this house . . . the drug dealers use this bar as a drop off spot . . . last night at approximately 1 am they were dealing drugs right under my bedroom window."

Margaret Darling of Worcester lives in a neighborhood which she describes as an open market for narcotics dealing, which public officials have sought not to eradicate, but to "confine" within a small number of blocks. "We are subjected to open drug deals, the dealers themselves, the customers, the prostitutes, their costumers, the pimps, and all the bizarre crimes that accompany such dealings," she wrote the subcommittee, describing herself and her neighbors as "robbed of our rights" as the result.

Denise L. Jezewski of Brockton wrote "my neighborhood has become a thoroughfare for small time drug dealers," many of whom "do not speak English and roam the streets day and night."

Mary McKenna of Dedham described how her son was killed by a driver who was simultaneously drunk and on drugs.

Jeanne M. Chadwick of New Bedford wrote a lengthy letter to the subcommittee describing the effect of drugs in New Bedford which summarized "the destruction of a neighborhood, due exclusively to the introduction of cocaine."

> "What had once been a close-knit, but poor neighborhood, evolved into an eyesore of destruction both physically and spiritually. The 'drug dealers' took over the streets and brought with them violence in the form of shootings, stabbing and numerous gang fights. The drug dealers decimated the physical landscape—destroying grass and trees . . . Mothers began keeping their children indoors more often, out of fear of their children getting caught in a crossfire of violence and foul language. On the other end, there were those mothers who were caught up in the scene, and their children soon showed signs of neglect—lack of supervision, unfed, improperly clothed, the sound of babies wailing—a mournful cry—the loss of their parents to this beckoning devil cocaine . . . People are now afraid to go outdoors or to leave their homes for any period of time. One never knows what they will find upon returning—a break-in, or 10 young men hanging outside your door, threatening, intimidating, causing fear in the simple act of leaving or entering your home. . . . Cocaine causes every hurtful thing we can imagine."

These and similar accounts bring home the daily injury that is being caused to citizens, families, neighborhoods, communities, and entire regions of the State as a result of the presence of foreign narcotics in Massachusetts.

The drug problem is not merely its many individual victims in Massachusetts, a matter of damaged private lives. It is also a problem of increasingly damaged public institutions, particularly the

institutions that are supposed to control narcotics and which cannot. These institutions include law enforcement agencies and police forces, schools, and financial institutions whose purpose becomes interfered with or subverted by narcotics.

V. Drug Money in Massachusetts

Illegal drugs generate enormous revenues. As "Lenny," a recovering drug addict and drug dealer testified:

> "Do you know what a drug dealer can do in 2 years? Does anybody here realize what I could do in 2 years? I used to make $50,000 to $60,000 a week with no problem."

Even at the local level, dealers generate cash from drugs that is substantial by any standard. As several witnesses testified, the availability of this cash has made a mockery of Massachusetts bail laws, because no matter how high a bail a judge may set, a drug trafficker is capable of paying it in cash.

As Norfolk County Sheriff Clifford Marshall testified:

> "I have in front of me the bails since 1984 from Norfolk County Jail, the jail side, for people who were involved in trafficking and cocaine and possession of class A through class D substance. In Norfolk County . . . all these people made the bail. Minimum bail was $5,000 cash, and the biggest bail paid in cash in a brown bag was $250,000. There are a number of them in excess of $15,000 to $25,000 to $45,000 and $50,000 and $85,000, all in cash."

Obviously, only a small fraction of the cash generated is used to pay the bail of those who get caught. Recent cases in Massachusetts against major drug traffickers have demonstrated that drug money is routinely laundered both inside Massachusetts, and wired to institutions beyond U.S. national borders.

As the U.S. attorney explained in a report to the Justice Department issued at the end of the summer:

> "In the past year or two [Massachusetts] has experienced everything from sophisticated international tax fraud schemes run out of Lenox, MA, in the Berkshires (the Quimby case), to extensive marijuana money laundering involving millions of dollars in cash and the use of Panamanian banks (the Caruna case), to use of local banks and the local real estate boom to launder marijuana proceeds (the Boston Boys), to less sophisticated operations (Bank of Boston and Bank of New England cases), and investment in local businesses (Laliberte case)."

The U.S. attorney found that traffickers have invested in real estate, especially in Boston and the Boston suburbs, including homes, condominiums, industrial property, a 43-acre subdivision in Ashland, 30 acres of waterfront property on Martha's Vineyard, and other valuable property, often in trusts which name children or other unwitting relatives as beneficiaries and trustees.

To quote the Justice Department report:

> "Other traffickers resorted to more elaborate forms of concealing assets. These schemes involved the laundering of money through numerous entities and countries and ultimately, the repatriation of the moneys into investments in this area."

For example, one money launderer, Laban Quimby of Lenox, created a Liechtenstein charitable foundation, Hong Kong holding companies, and made use of banks in Switzerland, Panama, and the Bahamas to help clients evade taxes and hide drug money.

A number of small check-cashing enterprises in the Boston area have been indicted for money laundering this year, and Federal law enforcement officials continue to receive information regarding money laundering in the State involving significant financial institutions, which U.S. Attorney Wayne Budd declined to name, noting merely that "certain organizations [remain] under investigation at the present time . . . and there do appear to be drug-money related connections with the Massachusetts banking community on foreign soil."

Several witnesses before the subcommittee suggested that they are unable to trace money once it gets beyond the boundaries of the United States. They therefore recommended Federal action to negotiate treaties that would allow U.S. law enforcement to trace money abroad.

VI. Public Corruption and Drugs

Previous investigations by the subcommittee demonstrated how drugs have corrupted foreign officials. This problem unfortunately has extended to officials in the United States at every level of law enforcement, and is now emerging as a problem in Massachusetts.

While the vast majority law enforcement officials in Massachusetts continue to work long hours performing critical work at relatively low pay under dangerous conditions, there is evidence narcotics have corrupted some law enforcement officials, undermining the morale of many more.

For example, last year the U.S. attorney's office indicted two Lawrence police officers on charges that they extorted money and cocaine from drug dealers, in return providing the dealers with confidential police information to help them avoid detection by law enforcement. Officer Daniel N. Fillipon pled guilty to drug-related charges, became a witness for the government in the case, and was sentenced for 4 years imprisonment on July 5, 1989. Fausto D. Rujiz was convicted at trial and sentenced to 20 years imprisonment on June 28, 1989.

A Medford Police Officer, Thomas K. Doherty, was convicted in 1987 for transporting 2 kilograms of cocaine from Florida to the Medford area, and sentenced to 20 years imprisonment.

A Salem police officer, Claudio Mateo, has been indicted in a conspiracy to distribute counterfeit money, guns, and drugs.

The Norfolk district attorney's office indicted the police chief for the city of Brockton, Richard Sproules, only a few weeks after Sproules testified before the subcommittee about the impact of narcotics on the city of Brockton.

On August 31, 1989, Brockton Police Chief Richard Sproules testified that foreign narcotics had transformed Brockton from a city to be proud of to one that is "in trouble."

> "Brockton was a great city to grow up in. I grew up there. It was like a big town. Brockton has changed and not for the

better. Brockton is in trouble . . . we are fighting a losing battle."

Just how serious the trouble for Brockton has become is suggested by Chief Sproules' own personal situation. In September, Chief Sproules was arrested on charges of drug-related corruption, and is being prosecuted by the Norfolk district attorney's office on drug-related and public corruption charges.

Nor is Chief Sproules the only recent case. In a very significant case of public corruption, Edward K. O'Brien, the DEA agent in charge of the Springfield office from 1980 through 1988, was arrested August 14, 1989, with 62 pounds of cocaine and simulated cocaine sold to him by DEA undercover informants following a DEA internal investigation. O'Brien had been a vocal and prominent investigator of narcotics offenses and a symbol of the fight against drugs in Springfield prior to his arrest.

An investigator in the Hamden County district attorney's office, Lieutenant Detective John Mace, who specialized in drug and organized crime investigations, was arrested October 23, 1989, following an alleged break-in which he was seen improperly reviewing confidential law enforcement information under suspicious circumstances. An affidavit in the case states that Mace was seeking to destroy a large number of case files from the district attorney's office at the time.

While some of these cases have not yet gone to trial, the very fact that a number of high-ranking officers in the war on drugs have been arrested on drug-related charges within the past 6 months in Massachusetts underscores the degree to which narcotics and narcotics money has already begun to undermine and corrupt public institutions in the State.

Nationally, the FBI currently has 197 pending public corruption cases which are drug related, involving a wide range of officials including mayors, judges, prosecutors, police chiefs, sheriffs, police officers, and higher level (GS–13 and above) Federal employees.

VII. The Law Enforcement Problem: More Drugs, Fewer Resources

Law enforcement officials described themselves as overwhelmed, outgunned, and outmanned, and their resources as inadequate and out of date. They described the problem of drug-related crime as massive, and the morale of those entrusted with fighting the war on drug as shaken by the lack of resources. Indeed, many viewed the "war on drugs" as already lost.

At the very time that drug-related crime poses increased demands on our law enforcement resources, State budgetary cutbacks and years of inadequate funding for criminal justice at the local level since the imposition of Federal cutbacks and Proposition 2½ have left law enforcement in Massachusetts dangerously weakened and unable to cope with its primary mission of protecting the public.

The problem extends to every aspect of the law enforcement mission—from investigation to arrest to prosecution, conviction, and imprisonment. At each stage, the State's resources are insufficient to combat the scourge.

In the words of Massachusetts Attorney General Shannon:

"The dirty little secret of the criminal justice system, when it comes to drug interdiction, is that all of us sitting at this table know of drug dealers who should be prosecuted, who are out there selling drugs as we speak here now. And we do not have the resources to go after them. That is obscene, but that is the fact."

The lack of resources extends from the largest statewide law enforcement organizations, like the U.S. attorney's offices and the attorney general's office, to the countywide drug task forces, and from the largest to the smallest communities in the State.

It takes place amid increasing violence connected to narcotics. District Attorney Ronald Pina described how his office has an arms room filled with weapons confiscated from drug dealers, including automatic weapons which threaten every police officer working in Massachusetts on drug cases.

As Worcester District Attorney John Conte testified:

"Law enforcement in Worcester County in the past 2 years has been in the middle of an explosion, a revolution. Arrests are at their highest level. Conviction rates have soared to unprecedented highs. . . . [Yet] our budget was level funded and then it was cut by $191,000. We have lost nine positions. . . . How does anyone think law enforcement can go forward in this day and age by being cut?"

As Norfolk District Attorney William Delahunt testified:

"We are inundated. We are going literally 24 hours a day in terms of dealing with dealers, with sellers. We do not really have time, but we will make time to deal with the user if we know that there would be an impact . . . [but] we have no place to put users, let alone dealers."

The lack of resources to meet the burdens imposed by this new level of threat to public safety was testified to vividly by Jim Jajuga, of the Essex County Drug Task Force:

"I am a member of a countywide drug task force, but there are 11 drug task forces in Massachusetts. I do not presently have a portable radio that I can use to communicate with an officer if I should have to leave my cruiser and chase a suspect down. . . . I hate to even bring this up because it is so basic, but we do not have currently a statewide criminal intelligence network similar to the NADDIS system that is run by the Drug Enforcement Administration whereby myself or any one of the other local police chiefs or detectives sitting at this table can access that computer for criminal intelligence. In 1989, we still have to rely on the old word of mouth and the telephone, and only on personal contact will we get the information necessary. . . ."

Budgetary cutbacks related to Proposition 2½ and reduced support from the Federal Government are causing some police departments to reduce their forces at a time when they need to hire additional police. A typical case is Brockton, as described by former Police Chief Sproules:

"We currently have 19 positions in our police department that will not be filled. . . . We have calls that are going unanswered. We do not have enough people to put in the cars. We are fighting a star wars with pitchforks, sticks, and slingshots.

We are outgunned. They have better communications than we do."

Rather than receiving additional resources at a time of increased demand, most law enforcement agencies in Massachusetts are now operating under increasingly serious reductions in money for anti-drug law enforcement.

As District Attorney John Conte of Worcester testified:

"We represent 60 local communities. Economically, these communities are in tremendous economic binds. Their budgets and local aid are being cut. Yet it is ironic, because intense, tough law enforcement works in the other direction."

In Martha's Vineyard, lack of money to fight drugs has significantly damaged the island's attempts to implement an islandwide drug task force and an islandwide education effort to fight drugs.

Commissioner of Public Safety Thomas R. Engle of Gardner testified that staff and budget shortages are threatening to destroy the North Worcester County Drug Task Force, a coalition of nine communities which have banded together to fight drugs:

"As cities and towns are forced to lay off police personnel or to eliminate overtime, the task force no longer becomes a priority to those communities because they still must provide the basic public safety protection for their own towns."

In Westfield, according to Police Chief Benjamin F. Surprise:

"We do not have the manpower. We are working in shifts that are unbelievable. . . . We are going crazy trying to take care of all these breaks, the assaults, the robberies on the street. . . . If you do not get down in the streets in the cities and the towns that have these problems, if we do not have any money and no cops out there, you can spend all you want on the National Guard, you can spend all you want in Colombia, and it is going to flow."

Similar testimony came from Springfield District Attorney Matthew J. Ryan:

"We have been cut in our budget so that now we have probably 12 less prosecutors for the cities and towns and no one to take their place."

Tom Melia, police chief of Northbridge testified:

"I have a police department of 23 members. I have the unfortunate occasion when I go home today of laying off or giving notice to eight policemen as a result of fiscal constraints. Having been a drug officer for years, I know that in any war on drugs you need . . . manpower, you need information, and you need money. . . . I just do not believe that laying off policeman is the answer."

"The people have lost faith in their local police departments," testified Police Chief John Finnegan of Beverly. "The police themselves are frustrated because of a lack of resources. The bail situation is terrible."

One reason an indicted criminal is let out of jail even when a judge may have reason to believe he will be an immediate and serious threat to the community and a high bail is set is a lack of jail space. All prisons in Massachusetts are 40 to 60 percent over capacity, according to statistics provided by the State's sheriffs. Court facili-

ties are in poor condition, and criminal investigative laboratories are backed up 3 months and more.

Bristol Sheriff David Nelson testified that 90 percent of the inmates he currently houses are incarcerated for drug- and alcohol-related offenses, and the jails are jammed beyond capacity:

> "We are ready to hold 150 inmates. But we had 410 inmates there last week . . . they are going to build a new jail in Bristol County, and the day we open the new facility, we will be 200 inmate [spaces] short, the day we open that facility."

In the words of Plymouth County District Attorney William O'Malley:

> "We have strained the capacity of the houses [of corrections] and the prisons to the point of bursting . . . yet, the problem of drugs has never been as great a problem as it is in our society today . . . you need more police officers to conduct the investigations. You need courthouses. You need, really, the resources throughout our system."

One immediate consequence of this lack of resources for the citizens of the Commonwealth is more crime. As Sheriff Michael Ashe of Springfield testified, a typical offender in a criminal pattern of activity on the street, such as a drug addict who commits burglaries and thefts, commits an average of 430,000 dollars' worth of crime each year while out on the street. Yet today in Massachusetts, as a result of overcrowding, seven counties are under a "Federal cap" on the number of prisoners they can house: Suffolk, Essex, Norfolk, Worcester, Springfield, and Deer Island. The result is that significant numbers of people who should be locked up are back on the streets.

Each time that the State jails and prisons must release a drug offender from incarceration because of overcrowding, they are in effect providing the citizens of Massachusetts with an additional $430,000 in criminal victimization over the following year. In the aggregate, this amounts to hundreds of millions of dollars in additional crime each year that takes place in Massachusetts as the direct consequence of Federal, State, and local officials being unable to find the funds to house convicted drug offenders.

As Springfield Sheriff Ashe testified:

> "Unless we can get appropriate correctional facilities on line quickly in this county, we could have a tragedy on our hands if one of these early released people harms a citizen. I need cells."

The demand for more prison space caused by the drug crisis is now causing the release of significant numbers of inmates to the streets, because there is not enough space to hold them in a constitutional manner. As Plymouth Sheriff Flynn testified:

> "This undermines and defeats our whole effort and purpose, and demoralizes everyone involved—the law makers, the officers on our streets, the prosecutors, the courts, the corrections officials, and most importantly, our citizens, who are after all, the ultimate victims of illegal drug activity and its associated crime and violence."

The resource issue has other implications beyond the simple need for more of everything that already exists: it also prevents criminal justice agencies from putting together new resources for

fighting drugs even when the need for them has been identified and the solution is clear.

For example, there is today in Massachusetts no central location for the storage of fingerprints that would allow local law enforcement to check fingerprints against a master list of those previously taken from people when arrested or convicted of a crime. There are no resources currently available to create such a center—and in some sections of the State there is no routine fingerprinting even of people convicted of crimes, nor routine method of sharing the fingerprint information when it is taken.

Those who testified before the subcommittee unanimously agreed that the State would not itself be able to come up with the resources needed to meet law enforcement needs. State and local law enforcement officials joined in testifying that substantially greater Federal help, of the kind once offered by the Law Enforcement Assistance Administration (LEAA), is essential.

In the words of Rhode Island Attorney General John O'Neill:

> "We operate within a criminal justice system that is essentially bankrupt; we operate on shoestring budgets. . . . We have clear thinkers, new thinkers, but we do not have the resources that allow you to really gain the leadership that is necessary."

VIII. Demand Reduction—Treatment and Education

Foreign interdiction and domestic law enforcement focus on reducing the supply of illegal drugs. Yet increasingly, experts on narcotics policy have begun to recognize that the drug problem is also a problem of demand. Demand reduction has become an increasingly significant component of Federal drug policy, as the most recent omnibus bill passed by the Congress in October demonstrated. It appropriated more than $3 billion for demand reduction programs out of a total of $8 billion for fighting drugs nationally.

The subcommittee received extensive testimony that the resources available to Massachusetts in the recent past have been far below that necessary to meet the need in reducing demand, to treat people currently using drugs, and to educate young people so that they never start.

Evidence of the increased demand is, quite literally, everywhere—on the streets, in the workplace and the schools, and increasingly, in the hospitals of Massachusetts.

As Plymouth District Attorney William O'Malley testified:

> "We have gone from a time when 1 baby in 1,000 was born addicted to heroin or cocaine to a time when 1 baby in 100 is born addicted to heroin or cocaine or has those drugs in its system, to a time when 1 baby in 10 . . . is born with those drugs in its system."

THE DRUG TREATMENT PROBLEM

For many drug addicts, each day they do not receive treatment and continue to use drugs represents a day in which they will commit crimes in order to finance their habit. While there is no precise estimate of the number of drug addicts in Massachusetts who commit crimes in order to finance their habit, it is clear that

the majority of heroin addicts and a significant number of cocaine addicts commit thefts, burglaries, and related acts of violence either to finance the purchase of more drugs, or as a consequence of drug intoxication.

In Boston, the current waiting list to enter treatment and rehabilitation programs is 6 months, according to Boston Police Commissioner Francis M. Roache.

What happens to addicts when they are turned away? According to William Askew, a recovering drug addict enrolled in New Bedford's treatment program:

> "If you come to the door and they say, come back in 6 weeks, you are not going to come back. You are going to go right back out to do what you were doing before, [or lose your life, take another life] . . . or commit a crime."

Donna McGuiness, a former legal secretary in Boston whose father is a Boston police officer, testified that after she became a drug addict, she wound up in jail after 2 years "on the run" with a cocaine user and trafficker. When she was released from the State woman's correctional facility at Framingham, she decided she wanted help in treating her drug addiction. Her probation officer sought to help her, and Ms. McGuiness called several detoxification centers seeking treatment:

> "They have lists so long I found it easier detoxing myself than it was to get into a detoxification center. There were about seven or eight that I would call every day, two or three times a day, and there was just no place that could take me."

It took Ms. McGuiness 5½ months before she was able to get into Spectrum House, and she only did so because she was highly motivated and determined to end her addiction. Nevertheless, without the treatment she received, as highly motivated as she was, she believed she could not end that addiction.

As Francesca Speicher of the Berkshire Council on Alcoholism and Addictions advised the subcommittee on behalf of the Western Massachusetts Providers' Association, when addicts are not treated in a timely fashion at the time they are willing and able to enter treatment, they do not disappear, but remain there, creating an expanding market for all drugs.

In New Bedford, there are currently 400 people receiving methadone treatment, with waiting lists of 1 month or more.

In Fall River, the Stanley Street Treatment and Resource Center has a 2-month waiting period for outpatients in need of substance abuse counseling, and a 2- to 6-week wait for its substance abuse detoxification program.

At Marathon House, the only long-term live-in therapeutic community in western Massachusetts for hard-core intravenous drug users, the waiting list is anywhere from 4 to 8 weeks. Yet even with this group, routinely considered the most difficult to cure, 90 percent of those who graduate from the program are free from drugs and criminal activity 1 year later; and 75 percent remain so after 7 years.

Treatment is not cheap. At the Stanley Street Center in Fall River, it costs over $2,000 per patient for a 21-day detox program. At other centers, costs are as high as $8,000 for such a program.

Yet the social costs to the drug user, the family of the drug user, the neighborhood and the community, if the drug user is not treated, heavily outweigh this cost.

As Sheriff Michael Ashe of Springfield testified:

> "A typical offender in a criminal pattern of activity on the street costs society $430,000 per year. This is a drug addict who burglarizes and shoplifts. This is one who is involved in a criminal pattern of behavior on the streets and drug addicts who we must deal with on a day-to-day basis."

Thus, every addict who is refused treatment represents a potential cost to the people of Massachusetts of about $1,150 per day in criminal activity.

As a result, the typical 21-day drug treatment program saves Massachusetts thousands of dollars, even when it only results in a user getting off drugs for 21 days. The cost to society during those 21 days could be as high as $25,000—three times or more the cost of the treatment even if they relapsed the first day out of the program. Moreover, as many as half of the users who are treated may never relapse into using illegal drugs, a saving to society that is incalculable.

Testimony before the subcommittee on the issue of "treatment on demand" was unanimous. Each witness offering an opinion on drug treatment said that treatment on demand throughout the Commonwealth was essential.

Yet resources at the State and local level for drug treatment have not been increasing. As a result of cutbacks in government resources through Proposition 2½, budget cuts, an end to Federal revenuesharing, and the Massachusetts economic crisis, programs are being widely cut at a time when they need to be expanded.

As Holyoke Mayor Martin Dunn testified:

> "The ability to obtain treatment I know in our area is very, very difficult. It is very difficult to go out to neighborhood meetings and encourage people to give up drugs, to get off cocaine, to get off heroin, and then when they tell you they want to, you have to tell them that you will put them on a waiting list. We have a methadone clinic in Holyoke which is just an outpatient clinic. We have an inpatient clinic that is very small, and the best that any of us can do for any of those proposed patients is to get them on a waiting list. We have to do better than that."

Even Spectrum House in Westboro, which is the largest drug treatment and research center in Massachusetts, is able to treat only "a small number of the persons addicted" in the Worcester area, according to Karen Orsini, its director of quality assurance. "Resources have been woefully insufficient," she told the subcommittee. "We have paid far too great a price for failing to effectively treat this problem, and it is literally killing us."

A similar story is that of the Faxon Recovery Service, also known as the Quincy Detoxication Center, in Quincy, which began in 1972 as an alcohol treatment center, expanded in 1988 to include all drugs, especially cocaine and heroin. It recently expanded its program from 20 to 30 beds, yet "even with the additional beds, we are full each day by 9, and the indigent addict must still be on a

waiting list for several days before he/she can enter treatment," the center's director testified to the subcommittee.

Faxon described the detox system as "the front line of services for the indigent addict and the only hope of assistance for their long-term recovery." Yet Faxon does not have the funds it needs to provide the services it is currently offering. "The war on drugs starts at our door. If funding is not made available, many of those doors will close. We are at the point now, financially, that if we continue running at full capacity without further funding we will have run out of financial support by mid-January 1990."

As Beadi Lazado, a recovering addict from Quincy, told the subcommittee, "addicts in this world deserve a second chance to change their life, and if you close the Faxon Detox Center, you don't know the damage that you may cause for those addicts who really want to change their lives."

Faxon had applied for a $350,000 grant from the Department of Health and Human Services to continue its drug treatment programs, which was not granted until after the hearings took place and Subcommittee Chairman Kerry intervened with HHS to request support for the program. The fragility of current drug treatment resources is suggested by the fact that Faxon has been in a position to close or substantially reduce its services without the discretionary Federal grant money.

Senator Kerry noted at the hearings that Massachusetts is currently spending about $13 million on drug treatment, and that for about $50 million, drugs users in Massachusetts could receive services that approximate treatment on demand.

EDUCATION PROGRAMS

Law enforcement personnel, elected officials, drug treatment personnel, and Federal officials unanimously agreed that antidrug education programs were essential to combat the use of narcotics by young people, and to reduce overall drug use in the State.

Several witnesses stated forcefully that Massachusetts should create a mandatory drug education program for kindergarten through grade 12 in every school in the State.

Perhaps the most compelling testimony summarizing how important drug education is came from "Lenny," a recovering drug addict who was a $1,000-a-day user of cocaine and a significant dealer of cocaine in the Quincy area:

> "If you people as a nation here . . . do not educate these kids about drugs—and I am not talking about telling them not to do it [I am talking about showing] them what it can do to you . . . then the drug dealer will educate them his way, and they are good at it . . . If you do not find things for these kids to do, then we will find things that we want them to do. I had more people working for me that were kind of left out in the cold, uneducated headed for incarceration. . . . You do not think that could happen in this country? That these drug people will run these kids if you do not stop them now? Believe me, they have more money than you. Believe me."

Currently, Massachusetts has a significant number of antidrug education programs which have cumulatively had some impact in

reducing drug use; however, many of these programs are being limited or even reduced in scope because of funding cuts.

For example, the Massachusetts Sheriffs' Association this year has made drug education one of its central goals as part of a campaign to achieve "a drug free Massachusetts." Each sheriff's office has developed a drug education program, designed for its particular county. Most feature meetings between inmates and students, in which inmates seek to tell students first hand how drugs hurt them, as well as antidrug films, and in some cases, antidrug support networks. Some of the innovative programs include:

BARNSTABLE. The sheriff's office has participated in establishing youth organizations that address substance abuse, including "Youth Leadership," the "Cape Cod Youth Council," and "I Care," along with a "Youth Ranch," which gives county youth the opportunity to work with ranch horses as a means of increasing self-esteem; preschoolers talk with a remote-controlled radio-voice operated robot named "Deputy King" about the risks of drugs; teenagers are taken to the county jail and house of correction to meet with inmates and learn the role that drugs and alcohol played in landing the inmates behind bars; and inmates go out to schools to meet with students to send the same message.

BRISTOL. The sheriff has initiated "Project SLAM," (Students Learning A Message), which over the past 6 years has shown hundreds of students first hand how drab and restrictive a life in prison can be; "Project SAVE" (Students Aware Very Early), geared toward younger students, in which an inmate visits schools with a sheriff to explain why resisting peer pressure to take drugs is preferable to the consequences of using them; "Project Straight TALK," (Teaching Kids, Loving Kids), a program aimed at teaching parents how to learn about the signs of illegal drug use so they can recognize them in their children; and implemented a "Project DARE," described below.

SUFFOLK. The JAILBRAKE program consists of a judge and the State's department of youth services "sentencing" a young offender to a 4-hour stay or JAILBRAKE in the Suffolk County Jail, where they wear jail clothing, eat jail food, tour the facility and talk to inmates and counselors. They quickly learn about the lack of privacy, boredom, and the reality of life in an 88-square-foot cell. More than 650 "inmates" have been "incarcerated" under the program. Suffolk also has a "DARE" program, described below.

To date, one of the most important education programs developed in the State to fight drugs is the "Drug Abuse Resistance Education," or DARE program, financed by the Massachusetts Committee on Criminal Justice under a grant from the Bureau of Justice Assistance in the Justice Department.

DARE is a substance abuse prevention education program aimed at elementary schoolchildren, designed to help them resist peer pressure to take drugs by raising their self-esteem, teaching them to make decisions on their own, and finding positive alternatives to alcohol and drug use such as sports.

As Hampshire/Franklin District Attorney Judd Carhart testified:

> "As a district attorney, I have never seen anything as effective as the DARE Program. Officers go into the schools and

> educate in a nonconfrontational manner sixth graders and really help them understand that drugs is not the way to go."

A number of communities in the State now have DARE programs; but the resources provided the State under the grant are for "selected communities" only. The Northhampton program referred to by D.A. Carhart is not funded federally. According to D.A. Carhart, "each city and town in my two counties is scrambling for ways to continue the DARE Program. We have not been very successful."

In Wellesley, Chief of Police John K. Fritts has questioned whether law enforcement efforts even in the "millions of dollars . . . can or ever will be truly effective . . . our most effective role at the local level is through education, especially of young persons." Accordingly, Chief Fritts has helped implement a DARE program in Wellesley as the most likely approach to make a different in that community.

The Framingham Police Department has assigned one police officer full time to its DARE program to teach fifth graders "even in the face of budget problems."

Several witnesses recommended that the program be extended to all communities in Massachusetts.

The city of Salem has initiated several programs aimed at reducing demand, forming a citywide Coalition to Prevent Substance Abuse which, like the DARE program, focuses on educating young people to develop "substance free alternatives for Salem's teens." The coalition has also sought to improve communications among the varying local community service agencies. And the city of Salem has instituted drug awareness seminars in the schools.

In Plymouth County, the Sheriff's Department talked to over 19,000 young people about narcotics and its potential impact on their lives, relying on volunteers and staff using their own time.

The Waltham Police Department has a school safety officer who spends the majority of his time in the schools, as well as two detectives who work exclusively with juvenile offenders and victims.

The town of Shirley has established a program whereby police officers go to the town schools 6 times a year to present antidrug programs, local sports figures come to the schools to lecture children on the perils of narcotics, and drug and alcohol information pamphlets have been sent to every home.

Inadequate resources remain the great obstacle in improving drug education and reducing drug use by children. As Worcester Mayor Jordan Levy testified:

> "Federal and State support for education is going down each and every year. If we cannot generate a kindergarten through sixth grade [drug education] program in the Worcester public schools this year because we are $270,000 short of doing that . . . obviously, we are failing and failing miserably."

Similar complaints were voiced by the Springfield district attorney's office, which said that drug abuse in Springfield extended down to the elementary school level, and that the only program aimed at combatting it, a drug awareness program offered by the Springfield Police Department, had been eliminated for the coming school year because of recent fiscal cutbacks. "Reimplementation of the drug awareness program, in the schools . . . is an essential tool

needed to educate the youth of the city on the street where the first line of defense must be fought," the DA's office concluded.

IX. The Federal Role—Is Washington Doing Its Job?

Since the advent of the Law Enforcement Assistance Administration in 1968, the Federal Government has provided funding for law enforcement assistance in Massachusetts. During the height of the LEAA, Massachusetts received $20 million in the mid-1970's—funding that would be worth approximately $50 million today, if the mid-1970's funding were adjusted for inflation.

By contrast, under the Reagan administration, the State received only a small fraction of that amount in assistance for fighting all crime, including drugs. During the 1980's, justice assistance funding nearly stopped with a final grant in 1984 of approximately $2.5 million. With Federal recognition of the impact of the drug problem, the Federal Government began again to provide assistance for antidrug efforts beginning in fiscal year 1987, funding them at the level of $4.1 million in 1987; $1.1 million in 1988, $2.6 million for 1989.

These sums, while helpful, amounted to substantially less than 1 percent of the total criminal justice spending in Massachusetts.

Next year, Massachusetts will receive approximately $9 million as the result of the Congressional decision to triple funding in this area beyond the President's original request.

While this tripling of resources will help Massachusetts this year, the help is reduced by the current statutory requirement that Massachusetts or its cities and towns provide 25 cents in new funding for each Federal dollar spent on new antidrug programs in the State. In a period in which the State and many of the cities and towns are experiencing significant budgetary deficits, this match may impose a burden which the State cannot meet.

There was unanimity among the witnesses before the subcommittee that the Federal Government needed to reinstitute the kind of level of assistance to the States and localities that it once provided under the Law Enforcement Assistance Administration (LEAA) in the late 1960's and throughout the 1970's. Under LEAA, local law enforcement assistance reached $895 million in 1975 dollars—an amount equivalent to about $2.1 billion a year today. By contrast, even with the passage of the most recent drug bill by the Congress, signed into law November 18, 1989, by the President, States and localities will receive just $450 million for this purpose, at a time when narcotics have made the problems faced by law enforcement much more serious.

Witness after witness compared the size of the Federal antidrug budget to the size of the Federal defense budget, and said that we would be better spending national resources fighting drugs which are invading the Nation everyday than in building weapons systems against threats which many of the witnesses did not believe were as significant.

As Essex District Attorney Kevin Burke testified:

> "While the Defense Department budget is somewhere in the $300 billion plus category, even the grandest of antidrug proposals would spend less than 5 percent of a Defense Depart-

ment budget to fight this war. Now as I understand war and as history tells us, war is a state of national emergency that requires mobilization of every resource of the national government. Nothing like that has occurred on the part of the Federal Government, and nothing like that frankly seems to be proposed to fight the war against drugs. We are talking about an investment of billions of dollars that has to be committed on a long-term basis."

District Attorney Burke added that the subcommittee should hear the message that "we in Massachusetts will give up our Stealth bomber if you agree to put [the funds] into the war on drugs."

Commissioner of Public Safety Arthur Kelly of North Adams similarly suggested that if Massachusetts received "one-quarter of a B–2, like the right wing," or about $125 million, the state's drug program "would fly."

The need for funds remains the central issue for most public officials in Massachusetts fighting drugs. Many were angry with the Federal Government's failure to deliver on promises made over a decade that the United States was actually fighting a "war on drugs." For example, Mayor Mary Hurley of Springfield testified:

"On the Federal level, I am sick of 'read my lips' and the lipservice we have gotten from the Federal Government over the last 8 or 9 years. If the Federal Government had been doing its job, if President Reagan had recognized the problems that are inherent in this whole drug situation . . . then we probably would not have to be sitting here today trying to come up with solutions."

Mayor Hurley recalled that President Bush came to Springfield during the Presidential campaign to be endorsed by the Springfield Police Department, but instead of providing real help to Springfield in fighting drugs, had provided only "lipservice." The mayor testified that she would "rather see the money."

Prison space remains a central issue between the State and the Federal Government. the State needs more space. Yet the Federal Government has failed to date to make adequate space available to the State.

As Sheriff David Nelson of Bristol testified:

"AIDS is not a Bristol County problem. It is a national, international problem. It is a by-product of the drug culture . . . And an effort has to be made by the Federal Government to address this need. On a regular basis, I turn away U.S. marshals who want to bring their prisoners and drop them off at the Bristol County House of Correction. I tell them, there is no room at the inn. I do not have any room for your prisoners . . . we have very definite needs and they have to be addressed on a Federal level."

Essex County Drug Task Force Chief Jajuga suggested that the Federal Government turn over excess and unused acreage on military bases such as Fort Devens and Fort Otis to the State for drug treatment and rehabilitation facilities to handle minor narcotics offenders, and thereby free up space from correctional institutions for major offenders.

Plymouth District Attorney O'Malley testified that the provision of additional spaces for prisoners by the Federal Government to Massachusetts would be "a very real tangible, concrete help to every community."

As Mayor Bullard of New Bedford and Mayor Viverios of Fall River testified, the National Conference of Mayors has outlined in detail a drug policy which calls for Federal assistance to localities for more prisons. To date, after the passage of the 1989 drug bill, there remains no new funding set aside for this purpose, and the administration continues to oppose additional Federal funding for State prisons.

Federal officials recognize the problem of not enough prison space. Special Agent John Coleman of the Drug Enforcement Administration, while testifying to the DEA's successes in Massachusetts, admitted that when it comes to prison spaces, the problem is acute. But he contended that the problem was nationwide, rather than one which created special problems for Massachusetts:

> "The lack of prison space and the lack of appropriate correctional institution facilities backs up the entire system to a point where many of the arrests that are being made today in America, especially in inner city urban environments, are virtually meaningless arrests. . . . We see statistics that suggest to us that less than 10 percent of the people arrested in the United States for serious drug crimes are ever incarcerated for this crimes. That is an alarming statistic."

Unfortunately, funding is not the only issue between the Federal Government and the States and localities when it comes to fighting drugs. Too often, local law enforcement personnel felt they have not received timely cooperation from Federal law enforcement.

As Bristol District Attorney Ron Pina testified:

> "When we talk in terms of dealing with Federal agencies and local agencies, I have to be honest and say that I do not think that there is a great deal of cooperation between Federal, State, and local agencies, in terms of the information flow."

According to the testimony of Essex County Drug Task Force head Jim Jajuga:

> "It seems like there is a lag in communication between the Federal, State, and local governments. Additionally, I have asked on numerous occasions for more Drug Enforcement Administration assistance in terms of enforcement assistance, and there never seems to be enough Drug Enforcement Administration officials available to help us."

Lawrence Mayor Kevin Sullivan bluntly charged Federal law enforcement with having ignored his city:

> "We have worked in the past with the FBI, DEA, INS, and ATF. Coordination has been very poor. [Lawrence] is a hub for drug activity. Yet DEA and FBI [have] ignored the city of Lawrence . . . their cooperation with Lawrence has been a joke. It has been terrifically marginal."

Several witnesses contended that an important reason that the Federal law enforcement agencies did not cooperate with them is because they were busy competing with one another, and that responsibilities wound up being fractionalized in the process.

Other law enforcement witnesses emphasized that the problem of competition instead of cooperation extended through State and local law enforcement. As Lieutenant David Rowell of the Quincy Police Department testified:

> "Competition in the local police department and with the adjoining judges and police departments, the competition between State police, local police, metropolitan police, sheriffs, and everybody that is involved in this total war has to be eliminated."

According to D.A. Pina, most of the information about drugs and crime that comes into his office comes from the bottom up, through grassroots intelligence gathering, and then often does not get out appropriately to the DEA or to the State police.

This problem is in part a consequence of the absence of a central location for information sharing. To quote DA Pina:

> "I can tell you right now, or the attorney general can tell you, in this State where we can find out who some of the major drug pushers are in a certain location, we could share that information and get it back out to local offices so that they would know if this group is running a drug operation out of Providence and now feeding the drugs into the Fall River and New Bedford area or other parts of the State . . . [but] there is no structure. There has to be a system by which we share this information and it has to be on an organized basis, not on a hit-and-miss, case-by-case basis."

In October 1988, all police chiefs in Massachusetts were asked to respond to a questionnaire from the State to describe what needs they had which could be funded under current Federal guidelines. Fifty percent or more of the police chiefs described a total of 16 categories of needs as being "very important" or "important." They included more funds for buy money (98 percent), equipment (96 percent), overtime (95 percent), basic training (95 percent), advanced training (96 percent), financial training (87 percent), drug hotline (87 percent), computers (90 percent), information sharing (99 percent), airport interdiction (53 percent), eradication (69 percent), money for informants (95 percent), a drug lab (89 percent), the DA task force (87 percent), the statewide vehicle pool (90 percent), and a foreign language pool (50 percent).

Overall, the police chiefs described information sharing as the single most important need overall as of late 1988.

Funding a centralized service for the sharing of information among law enforcement agencies was the principal goal of the Drug Intelligence Assistance Act sponsored by Senator Kerry in the last session of Congress, and opposed by the Bush administration.

Under that act, States and localities would have received $120 million to fund computers and information systems, intelligence and investigative training, and related law enforcement activities to help local law enforcement make the best possible cases against the most serious narcotics offenders.

Because of the administration's opposition to the program, the Drug Intelligence Act was not added to the 1989 drug bill. Instead, the administration agreed to allow the $450 million that had been appropriated for all justice assistance to the States and localities to

be spent, in part, on the development of such networks. Those funds will be available as part of the discretionary grant money from the Bureau of Justice Assistance as of early 1990.

The Federal role in helping Massachusetts in the social service area of drug treatment and education was also criticized. As Hampshire and Franklin County District Attorney Judd Carhart testified:

> "The Federal Government under President Reagan . . . did virtually nothing in social services . . . while I applaud the increase in law enforcement federally, I must say without a concurrent increase in social services funds and intelligent programs federally, we are not really going to come to grips with this problem."

X. Legalization

The subcommittee received several letters from Massachusetts residents, as well as two letters from Massachusetts police chiefs, recommending that legalization or decriminalization of drugs be considered by policymakers as a possible solution to the drug problem.

In both cases, the police chiefs are experienced soldiers in fighting drugs who have earned the right to their views as a result of years of enforcing drug laws.

The arguments in favor of legalization are in essence that the problems associated with narcotics are similar to those we once experienced with prohibition, and that ending prohibition on some narcotics would reduce drug-related violence and crime and should therefore be considered.

As Franklin Police Chief Lawrence P. Benedetto wrote:

> "It seems that the entire picture of substance abuse needs some clear delineation as to what is a dangerous drug and what isn't; what might be decriminalized; what role will best meet the ability and resources of government for effective enforcement; and, where do we realistically say we need an approach that will address the problem as opposed to a response somewhat similar to the prohibition era, which we have today. In my 20 years of law enforcement I have observed the illegal drug problem in this country grow while government (including local government) has vainly sought solutions which obviously are not working. Much of the problem lies with our society which has a proclivity to use drugs, both legal (prescription and illegal) and illegal. . . . It seems to me that we did not learn anything from our experience with prohibition. . . . Our feelings are to best meet the needs of our citizens on this issue we should begin with youngsters in elementary school and provide information from a health perspective with programs that will accompany them through adolescence; some realistic legislation toward decriminalization where appropriate; enhanced enforcement aimed toward the truly most dangerous violators (traffickers and major dealers); clinics and provision for the addicted who are beyond help and education; and some admission that our society is one with a desire to use and abuse certain

substances and to educate as to what one can do and what cannot be done."

Police Chief Warren E. Wilson of Bolton bluntly expressed his support for decriminalizing drugs:

"It is my considered opinion, after 25 years as a police chief, that we cannot win this war without resorting to illegal tactics. I do not condone illegal tactics. I do believe we should end this war by ceasing prohibition against drugs. The underground economy involved is robbing us of millions of dollars of taxable revenue. The deaths and dangers we face in battling massive organized crime are too costly. Take away the billions of dollars from the criminals. Educate and supply the users with legal goods as we did with alcohol."

The subcommittee chairman views these two statements as extremely interesting from the point of view of law enforcement, because they reflect a combined experience of 45 years in that field by two dedicated officers.

However, the subcommittee also received a number of statements from recovering drug addicts describing how their use of narcotics in and of itself nearly destroyed their lives.

For example, William Roberland wrote the subcommittee to say that Faxon House, a drug treatment facility, saved his life, and that he was literally dying from drugs before he received treatment.

William Askew, another recovering drug addict, said that he used cocaine because it made him feel good, and he only decided to stop because too many of his friends were dying from drug overdoses and the drugs were interfering with his relationships with his family.

"Lenny," a former drug dealer and addict, described the effect of drugs on children, how he asked a 12-year-old girl who was using drugs what the worst thing that happened to her as a result was, and she said, "waking up with a man I do not know."

The statistics nationwide on the increasing incidence of infant mortality in connection with cocaine provide further documentation for the case against legalization. Everyday, cocaine addicted babies are born in the United States. Many are dead at birth, or die soon after. Others have brain damage or other serious health problems that they will live with the rest of their lives. Legalization of cocaine would not stop pregnant women from causing these injuries to their babies. To the contrary, any drug that is legalized by definition becomes more available—not merely to the adult members of a society, but as alcohol has demonstrated, to young adults and even children as well.

Thus the strongest case against considering legalization of drugs such as cocaine and heroin, may not be the violence and crime that has always been associated with them, but with the serious public health problems created by their use.

The end of prohibition did not solve the problem of alcohol addiction, and alcoholism remains one of the United States most significant illnesses. The testimony taken by the subcommittee demonstrates in part why legalizing currently illegal narcotics is not an appropriate solution to the drug problem, but more likely to increase the misery drugs are already causing.

XI. The Massachusetts State Strategy

In the face of the drug crisis, and with limited resources, Massachusetts has implemented a significant number of innovative programs to combat narcotics, but the programs continue to be overwhelmed by the sheer magnitude of the problem as compared to the resources available.

Since the mid-1980's, the State through the Massachusetts Committee on Criminal Justice, the Governor's Statewide Anti-Crime Council, the Governor's Alliance Against Drugs, the Governor's Highway Safety Commission, the Governor's Reclaim Our Communities Program, and related efforts, has sought to use a statewide task force approach to combating narcotics. From 1984 to 1987, as the result of Federal cutbacks, these organizations were funded entirely by the Commonwealth of Massachusetts, supplemented by private funds.

Under this approach, seed money from the State was used to fund a mixture of education programs that combine public and private resources, the work of public officials like sheriffs, law enforcement officers, nurses and teachers, with volunteer efforts by prominent sports figures, parents, and community leaders.

In 1983, the Governor created a Statewide Drug Task Force to target mid- and upper-level drug traffickers responsible for the delivery of distribution of large volumes of illicit drugs into or within Massachusetts.

To carry out this mission, the Governor assigned 100 State troopers to the 11 district attorneys office to form drug task forces, to create a backbone for coordinating local antidrug law enforcement efforts.

In 1984, Governor Dukakis opened a second front in fighting drugs with the creation of the Governor's Alliance Against Drugs. While the task force focused on cutting supply, the goal of the alliance was to reduce demand through creating a network of community-based advisory councils, drug education programs, and drug treatment programs.

By September 1987, the first year that the State provided a comprehensive statewide strategy to the Justice Department, Massachusetts had in place:

—Eleven regional drug task forces assigned to the county district attorneys offices.

—A cooperative effort among various agencies to prevent the diversion of prescription drugs.

—A State police drug diversion investigation unit.

—A statewide network of drug prevention programs coordinated by the Governor's Alliance Against Drugs.

—Expanded programs to increase residential treatment for drug addicts in the department of public health.

—Establishment of citizen "hot lines" to concentrate law enforcement in the areas where drugs are most prevalent.

In 1987, Massachusetts used newly available Federal antidrug funds to target street crime and drug sales, granting funding to seven major city drug investigative units and to 12 community impact areas, and assisting them with drug buy money, training, and updated laboratory services.

The second year of Massachusetts drug enforcement strategy continued these programs, and added one-time grants to the Roxbury district court to establish a urine drug testing program, and to the sheriff's departments and the criminal information section for computer systems. The State also initiated a violent fugitive arrest squad, to identify and arrest fugitives wanted for major drug offenses in the Roxbury area.

In 1989, Massachusetts primarily funded street-level apprehension operations, as well as drug treatment projects, and the establishment of a juvenile priority prosecution unit and a financial investigation program.

As a result of this activity, Massachusetts was able to report many more arrests, convictions, and seizures, but told the Federal Government in its February 1989 drug strategy report that "current strategies for dealing with substance abusing offenders in the criminal justice system can [still] be characterized as fragmentary, inadequate, and sometimes contradictory."

As of today, Massachusetts has identified a significant number of additional criminal justice needs for which it could use Federal dollars, but the scope of the needs continue vastly to outweigh the funding.

XII. Drugs and Poverty: Creating Alternatives

National drug use statistics released in September by William Bennett, the Federal drug czar, show that the numbers of Americans who are using drugs now have declined over past years. This positive statistic, when examined more closely, shows that the decline in usage has been limited almost entirely to people in the middle and upper economic classes. Among poor people, drug use is as high as it has ever been in the United States.

Drug use is an increasingly important component of poverty in the United States, with drug-related crime and violence providing further victimization of people who already receive the least benefits from society.

In order to fight drugs effectively, the Federal Government must devote increasing attention to addressing the problems created by high levels of drug abuse and drug crime among the poor. These problems include the threat to the security of people who live in these areas, housing issues, education issues, and health care issues. The subcommittee chairman believes the drug problem among the poor in Massachusetts would be improved by:

EDUCATION: A national commitment to day care and early education to help children develop self-esteem and enough self-confidence to withstand the temptations of drug use and drug activity. Education about the links between drug use and AIDS must be expanded and pursued aggressively. AIDS education must reach the streets where crack abusers are found.

HEALTH CARE: Expanding prenatal services so pregnant women receive adequate nutrition and education about the effects of drugs and alcohol on their babies. With aggressive programs, more babies will be born healthy. Unfortunately, with the phenomenon of women crack addicts, these services are insufficient for many pregnant women. Counseling and psychological programs for

women crack addicts need to be expanded in some communities, and created from scratch in others.

HOUSING: Upgrading and rehabilitating existing housing stock and repairing and renting vacant housing units that are often sites for drug activity. This work needs to encompass privately owned vacant units as well as public housing and federally assisted housing. In Boston, for example, efforts by the Massachusetts State housing finance agency to rehabilitate and eliminate drugs from the 2,000-unit Granite Properties, recently acquired from HUD, have been hindered by the existence of drug activity and drug-related crime in surrounding developments such as Franklin Park I and II, that are either privately owned and federally assisted, or owned by HUD.

ECONOMIC ALTERNATIVES: As Housing and Urban Development Secretary Jack Kemp has noted: ". . . The drug effort cannot be combated only on building jails and prisons and more reform of our criminal system. We have to provide alternatives." For more than 10 years, enterprise zones have been discussed as a mechanism to help in promoting entrepreneurship and in creating jobs in our Nation's distressed urban and rural communities. To date, however, the majority of enterprise zone bills have emphasized tax incentives and regulatory relief as ways to encourage companies to move to expand into these distressed areas. The subcommittee chairman believes that some of these proposals are sound, but they fail to address the capital needs of businesses starting up within a given zone. Accordingly, the subcommittee chairman recently introduced legislation to build upon current enterprise zone proposals in three significant ways. The bill, the "Drug Zone to Economic Opportunity Zone" Act is designed to give automatic enterprise zone eligibility for areas designated as high-intensity drug areas, and would provide those areas with a capital loan and grant program funded through a revolving loan fund for eligible entities within a designated enterprise zone, to be used for a number of activities and services, including job creation; job-specific skills training; community infrastructure improvements; and to meet critical social needs, including crime control, drug abuse, child care, and homeless assistance, thereby encouraging the success of not only the business enterprises located within the zone, but the success of the larger community as well.

XIII. Conclusions

While the drug problem in Massachusetts is a serious local problem, the local problem is one that has developed out of commerce that reaches far beyond the State's own borders.

The State's drug problem is a component of the U.S. national drug problem, and the international drug problem. The problem is not one, therefore, that Massachusetts can solve alone.

Until a Federal drug strategy and a true Federal "war on drugs" substantially reduces the quantities of narcotics that are now invading the States, the people in the communities who are the soldiers in the war will continue to fight against odds that are overwhelming.

Drugs must be interdicted before they enter the United States, and the Federal Government is the only institution we have which is potentially capable of carrying out this task effectively. Interdiction has not been effective to date in part because the Federal Government has not chosen to direct current resources, especially those in the military, toward the surveillance of boats and planes off our borders. At the direction of Congress, the military has now undertaken to begin this mission, whose success is critical to reduce supply.

To fight the drug problem internationally, which has damaged foreign countries like Colombia, Panama, Peru, Haiti, and the Bahamas substantially, the Federal Government must intensify efforts at foreign eradication of the crops used to make illegal drugs, push for the successful extradition of foreign drug criminals, and take aggressive steps to stop the laundering of U.S. currency by foreign drug traffickers.

At home, the Federal Government's role must be to assist the communities that are being damaged by narcotics by providing the resources and expertise to help them fight back. This means a substantial increase in the overall Federal commitment for local criminal justice assistance, drug treatment, and drug education, as well as an immediate program of assistance to help States find prison space to house drug offenders and treatment space to treat drug users. The Federal Government must also address the additional programs of drug abuse in poor communities. This will require developing new approaches to educating those who now drop out of school, to training the untrained for jobs, and to providing clean, safe affordable housing for those who currently have none. Without hope for all their inhabitants, our poorest communities are unlikely to ever quit the drug habit.

As the subcommittee chairman said at the outset of the hearings in New Bedford on August 29, 1989:

> "The stakes are high. The stakes are far higher than most Americans have been willing to admit, and we have to end the rhetoric and begin the reality of the fight against drugs. There is no one beginning place. It is not just prosecution. It is not just treatment. It is not interdiction or law enforcement. It is a question of when you wage a war, you do it on all fronts. You do it in order to win."

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